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FORM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

PROCESSED
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THOMSON REUTERS

FORM D

OMB APPROVAL

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hours per response.....16.00

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY							
Prefix	Serial						
[l_							
DATE RECEIVED							
1	1						

Name of Offering (check if this is an amendment and name has changed, and indicate change.) Series A Preferred Stock		()[6 Mail Facessing
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	☐ ULOE	Section
A. BASIC IDENTIFICATION DATA		<u> </u>
1. Enter the information requested about the issuer		*** *** ***
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Sweety High, Inc.		100
Address of Executive Offices (Number and Street, City, State, Zip Code) 2000 Pine Avenue, Manhattan Beach, CA 90266	Telephone Numb (310) 546-9869	er (Including Area Code)
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Numl	oer (Including Area Code)
Brief Description of Business		
business trust limited partnership, to be formed	clease specify):	08056162
Actual or Estimated Date of Incorporation or Organization: 111 017 Actual Estin Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)		-

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

		A. BASIC	IDENTIFICATION DATA	<u></u>	
2. Enter the information req	uested for the foll	lowing:			
· ·			d within the past five years;		
 Each beneficial own 	er having the powe	er to vote or dispose, or	direct the vote or disposition	of, 10% or more of	a class of equity securities of the issue
 Each executive office 	er and director of	f corporate issuers and	of corporate general and ma	maging partners of p	partnership issuers; and
 Each general and ma 	anaging partner of	f partnership issuers.			
Check Box(es) that Apply:	Promoter	■ Beneficial Own	er	✓ Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Zelle, Veronica	ŕ				
Business or Residence Addres 2000 Pine Avenue, Manha	•	•	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Own	er 🛮 Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Simonetti, Frank	 ,				
Business or Residence Addres	s (Number and	Street, City, State, Zir	Code)		
2000 Pine Avenue, Manha	•		•		
Check Box(es) that Apply:	Promoter	Beneficial Own	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if Carl and Gabrielle Eichsta		st			
Business or Residence Addres 917 Highview Avenue, Ma	•	· · · · · ·	p Code)		
Check Box(es) that Apply:	Promoter	Beneficial Own	er Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Pacific Fire Protection					
Business or Residence Addres 821 N. Lake Street, Burba		Street, City, State, Zi	p Code)		
Check Box(es) that Apply:	Promoter	Beneficial Own	ner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if Audette, Joe	individual)				
Business or Residence Address P.O. Box 55068, Riversid	•	• • • • • • • • • • • • • • • • • • • •	p Code)		
Check Box(es) that Apply:	Promoter	Beneficial Own	ner Executive Officer	r Director	General and/or Managing Partner
Full Name (Last name first, it	findividual)				
Business or Residence Address	ss (Number and	Street, City, State, Zi	p Code)		
Check Box(es) that Apply:	Promoter	Beneficial Own	ner Executive Officer	r Director	General and/or Managing Partner
Full Name (Last name first, it	f individual)			- <u>-</u>	
Business or Residence Address	ss (Number and	Street, City, State, Zi	p Code)		· · · · ·
	(Use bla	ank sheet, or copy and	use additional copies of this	s sheet, as necessary)

	· · · · · · · · · · · · · · · · · · ·				·B.: II	NFORMATI	ON ABOU	r offeri	NG				
_												Yes	No
1.	Has the	issuer solo	l, or does th							-			
2	What is	the minim	um investm			Appendix,		-				\$	
2.	Wildt 15	the minni	um mvestm	iciit tiiat w	iii oe acce	pied from a	ny materia	uai:	•••••	***************************************		⊸Yes	No
3.	Does the	e offering	permit joint	t ownershi	of a sing	le unit?							
4.			ion request										
			ilar remune ted is an ass										
	or states	, list the na	ame of the b	roker or de	aler. If mo	re than five	(5) person	is to be list	ed are asso				
Eul			, you may se first, if indi		informati	on for that	broker or	dealer only	'. 				
rui	ii ivallic (i	Last Hailic	iiist, ii iiidi	ividuai)									
Bu	siness or	Residence	Address (N	lumber and	Street, C	ty, State, Z	ip Code)		. 				
Na	me of Ass	ociated Bi	roker or De	aler		•							
Sta	ites in Wh	ich Persor	Listed Has	s Solicited	or Intends	to Solicit I	Purchasers						
	(Check	"All State:	s" or check	individual	States)	••••••	*****************	***************************************		************	••••••	☐ Al	l States
	AL	ĀK	ΑŹ	AR	CA	[CÖ]	[CT]	DE	DC	FL	GA	HI	[ID]
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	<u>WI</u>	WY	PR
Fu	ll Name (Last name	first, if ind	ividual)									
Bu	siness or	Residence	Address (1	Number an	d Street, C	ity, State, 2	Zip Code)						
			<u>-</u>										
Na	me of Ass	sociated B	roker or De	alcr									
Sta	ites in Wh	ich Persor	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All State	s" or check	individual	States)	••••••••••	***************************************					☐ Al	l States
	AL	AK	ΑZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL	IN	ĪA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	[WI]	WY	(PR)
Fu	Il Name (Last name	first, if ind	ividual)									
Bu	isiness or	Residence	e Address (Number an	d Street, (City, State,	Zip Code)		. =			<u>-</u>	<u>.</u>
Na	ıme of As	sociated B	roker or De	aler		· - · · · ·				 -			
<u></u>	nteg in 11/1	sich Darne	n Listed Ha	o Colinitad	or Intend	to Calinit	Durchager						
Sti			n Listed Ha s" or check						<i>,,,,</i> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				l States
	AL IL	AK IN	AZ IA	[AR]	CA KY	CO LA	CT ME	DE MD	DC MA	FL Ml	GA MN	HI MS	(ID) MO
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	\overline{WV}	WI	WY	PR

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
	Type of Security	Aggregate Offering Price		Amount Already Sold
	Debt	\$:	\$
	Equity		- }	s 665,000.00
	Common Preferred			30,000.00
	Convertible Securities (including warrants)		-	3
	Partnership Interests		_	3
	Other (Specify)		-	\$
	Total	\$ 1,230,000.00	_	\$ 695,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			Aggregate Dollar Amount of Purchases
	Accredited Investors	11	_	\$ 695,000.00
	Non-accredited Investors		_	\$
	Total (for filings under Rule 504 only)		_	\$
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.			
	Type of Offering	Type of Security		Dollar Amount Sold
	Rule 505			\$
	Regulation A		•	\$
	Rule 504			s
	Total			\$ 0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	;		
	Transfer Agent's Fees		ם	\$
	Printing and Engraving Costs	_	_	\$
	Legal Fees	_	_	\$ 15,000.00
	Accounting Fees	•	_	<u> </u>
	Engineering Fees	_	_	\$
	Sales Commissions (specify finders' fees separately)	-	ے د	\$
	Other Expenses (identify)	_	ا ا	\$
	Total		7 1	£ 15,000.00

L	C. OFFERING PRICE, NUMBE	R OF INVEST	ORS, EXPENSES AND USE OF	PROCEEDS	
	b. Enter the difference between the aggregate offering and total expenses furnished in response to Part C — Qi proceeds to the issuer."	uestion 4.a. Th	is difference is the "adjusted gross	3	\$1,235,000.00
5.	Indicate below the amount of the adjusted gross proceed of the purposes shown. If the amount for any check the box to the left of the estimate. The total of the proceeds to the issuer set forth in response to Part C	purpose is not ne payments lis	known, furnish an estimate and sted must equal the adjusted gross	l	
				Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees	********		<u>\$</u>	\$
	Purchase of real estate	******************		 \$	\$
	Purchase, rental or leasing and installation of machi			П.	rin ¢
	Construction or leasing of plant buildings and facili			_	
	Acquisition of other businesses (including the value			Ц з	_ 🗆 "
	offering that may be used in exchange for the assets	or securities	of another		
	issuer pursuant to a merger)			_	_
	Repayment of indebtedness				
	Working capital				
	Other (specify):			\$	_ □ \$
				<u> </u>	s
	Column Totals	•••••		\$ <u></u> \$	5 1,235,000.00
	Total Payments Listed (column totals added)	•••••		⊘ \$ <u>1</u>	,235,000.00
Γ		D. FEDERA	L SIGNATURE		
sig	sissuer has duly caused this notice to be signed by the unature constitutes an undertaking by the issuer to furnitioning information furnished by the issuer to any non-accre	ish to the U.S.	Securities and Exchange Comm	ission, upon writt	
lss	uer (Print or Type)	Signature		Date	·
S	veety High, Inc.			7-14-0	V
Na	ne of Signer (Print or Type)	Title of Signe	r (Print or Type)	, , , , ,	-1
	* ' '	President	VERONICA ?		

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE		
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No ⊠

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature Date
Sweety High, Inc.	7-14-08
Name (Print or Type)	Title (Print or Type)
Veonica Zelle	President VERONICS ZELLE

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

	APPENDIX										
l	Intend to non-a investor	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pui	investor and rchased in State C-Item 2)		Disquali under Sta (if yes, explana waiver (Part E-	fication te ULOE attach tion of granted)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
AL									<u></u>		
AK											
AZ											
AR											
CA		×	Series A Preferred	11	\$695,000.00	0	\$0.00		×		
СО											
СТ											
DE											
DC											
FL											
GA											
н											
ID					!						
IL											
IN											
IA											
KS											
KY											
LA			.,								
ME											
MD											
MA											
MI											
MN											
MS											

2 3 1 Disqualification under State ULOE Type of security Intend to sell and aggregate (if yes, attach offering price Type of investor and to non-accredited explanation of offered in state amount purchased in State waiver granted) investors in State (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) (Part B-Item 1) Number of Number of Accredited Non-Accredited State Yes No Investors Investors Yes Amount Amount No MO MT NE NV NH NJ NM NY NC ND OH OK OR PA RΙ SC SD TN TX UT VT VA WA wv WI

APPENDIX

				APP	ENDIX								
1		2 3 4					4						
	Intend	l to sell	Type of security and aggregate	under							Disqualific under State (if yes, at		
:	investor	s in State	offering price offered in state		Type of investor and amount purchased in State				ation of granted)				
	(Part B	-Item 1)	(Part C-Item 1)	Number of	(Part C-Item 2) Number of Number of			(Part E	-Item 1)				
State	Yes	No		Accredited Investors	Amount	Non-Accredited Investors	Amount	Yes	No				
WY													
PR													

